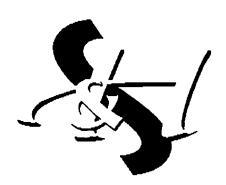
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**JCWSCS 2 1 OCT 2004** 

Smith&Hopen, P. A.





# smith & hopen, p.a.

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## INTELLECTUAL PROPERTY LAW

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Re:	USSN: 10/711,547	CC:	<del>-</del>	
Phone:	(703) 308-1202`	Date:	October 21, 2004	
Fax:	(703) 746-9195	Pages:	7 including covershe	set
Attn:	Filing Receipt Correction	s Client;	1644.01	
	Office of Initial Patent Ex	amination		
IO:	u.s. Patent & Iragemark	Office - From;	Anion J. nopen	

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Practitioner's Docket No.: 1644.01

**PATENTS** 

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

Michael Poindexter

SERIAL NO.:

10/711,547

FILING DATE: 09/24/2004

**ART UNIT: 3765** 

**EXAMINER: UNASSIGNED** 

FOR: MOMMY BIB

Faxed to Office of Initial Patent Examination (703) 746-9195 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### TRANSMITTAL OF REQUEST FOR CORRECTION

Sir,

Please accept the enclosed:

- 1. Applicant's Request for Correction of Filing Receipt (1 page);
- 2. Application Data Sheet (2 pages); and
- 3. A copy of the filing receipt received by counsel (2 pages).

The Commissioner is authorized to charge any additional fees, or credit any overpayment, to Deposit Account No. 500745.

Very respectfully,

SMPTH & HOPEN,

\_\_\_\_

Anton J. Hopen 15950 Bay Vista Drive, Ste. 220

Clearwater, FL 33760

(727)507-8558 Attorneys for Applicant

## CERTIFICATE OF FACSIMILE TRANSMISSION

(37 C.F.R. I.8(a))

I HEREBY CERTIFY that this Request for Correction of Filing Receipt is being transmitted by facsimile to the United States Patent and Trademark Office, Office of Initial Patent Examination Filing Receipt Corrections (703) 746-9195 on Thursday, October 21, 2004.

Dated: 10/21/2004

Docket No. 1644.01

PATENTS

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Applicat	tion of:	)		
	MICHAEL POINDEXTER	)		
Serial No.:	10/711,547	)	Art Unit:	3765
		)	Examiner:	Unassigned
Filed:	09/24/2004	)		
For: MOM	IMY BIB	)		

Faxed to Office of Initial Patent Examination (703) 746-9195 Commissioner for Patents Mail Stop OIPE Customer Service Center P.O. Box 1450 Alexandria, VA 22313-1450

#### REQUEST FOR CORRECTION OF FILING RECEIPT

Sir:

We are in receipt of the attached Filing Receipt for the above-referenced application. We have compared the Filing Receipt with a copy of the application we have retained in our records and have determined that certain information was incorrectly entered into the PTO's system. The undersigned hereby requests that the Domestic Priority data as claimed by applicant and the Non-Publication Request be changed on the filing receipt and in the record of the above-mentioned application as follows:

This application claims benefit of 60/561,185 04/09/2004\* (\*)Data provided by applicant is not consistent with PTO records, should be changed to This application claims benefit of 60/561, 185 04/21/2004.

No should be changed to Yes.

A copy of the original filing receipt is enclosed. The issuance of a corrected filing receipt is respectfully requested.

Reg. No. 41,849

Tel. No.: (727) 507-8558

SIGNATURE OF PRACTITIONER

Anton J. Hopen Smith & Hopen, P.A.

15950 Bay Vista Drive, Ste. 220

illy submitte

Clearwater, FL 33760

### CERTIFICATE OF FACSIMILE TRANSMISSION

(37 C.F.R. 1,8(a))

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Dated: 10/21/2004

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	APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO		DRAWINGS	TOT CLMS	IND CLMS
	10/711,547	09/24/2004	3765	385	1644.01		3	7	1

**CONFIRMATION NO. 5546** 

21901 SMITH & HOPEN PA 15950 BAY VISTA DRIVE SUITE 220 CLEARWATER, FL 33760

Date Mailed: 10/13/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filling Receipt, please write to the Office of Initial Patent Examination's Filling Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filling Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filling Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filling Receipt Incorporating the requested corrections (if appropriate).

Applicant(s)

Michael Poindexter, Spring Hill, FL; Connie Poindexter, Spring Hill, FL:

Power of Attorney: The patent practitioners associated with Customer Number 21901.

Domestic Priority data as claimed by applicant

This apply daims benefit of 60/501,185 04/00/2004. This application claims benefit (\*) Data provided by applicant is not consistent with PTO records of G6/561,185 04/21/2004

Foreign Applications

Projected Publication Date: To Be Determined - pending completion of Security Review

Non-Publication Request: Ne Yes

Early Publication Request: No

\*\* SMALL ENTITY \*\*

Title

Page 2 of 2

Mommy bib

**Preliminary Class** 

002

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